**编号：**

**中国科学院发展中国家访问学者计划推荐表**

接收单位名称（盖章）

访问学者姓名

访问学者国籍

申请类别 A类（短期访问学者） □

B类（博士后） □

中国科学院国际合作局制

年 月 日

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 发展中国家访问学者的基本情况 | 姓 名 |  | 性别 |  | | 国籍 | |  |
| 职 位 |  | 电 话 | | |  | | |
| E-Mail |  | 传 真 | | |  | | |
| 研究领域 |  | | | | | | |
| 工作单位 |  | | | | | | |
| 联系地址 |  | | | | | | |
| 访问学者简历、主要学术和技术成就、在国外机构和国际组织任职情况以及曾获得的主要国际学术奖（中英文） | | | | | | | |
| 发展中国家访问学者在我院工作计划安排 | 访问学者在我院期间的具体合作研究项目、学术交流、人才培养、拟解决问题等活动计划 | | | | | | | |
| 接收单位合作者的情况以及推荐意见 |  | | | | | | | |
| 中方合作者的  信息 | 姓 名 |  | 性别 |  | 职务 | |  | |
| 电 话 |  | E-Mail | |  | | | |
| 手 机 |  | 传 真 | |  | | | |
| 研究领域 |  | | | | | | |
| 接收单位意见以及相关承诺 | 接收单位负责人： （盖章） 年 月 日 | | | | | | | |
| 专业局的意见 | 专业局领导： （盖章） 年 月 日 | | | | | | | |
| 国际合作局的意见 | 国际合作局领导： （盖章） 年 月 日 | | | | | | | |
| 国际合作主管院领导的意见 | 主管院领导： 年 月 日 | | | | | | | |

**APPLICATION FORM**

**CHINESE ACADEMY OF SCIENCES VISITING FELLOWSHIP FOR RESEARCHERS FROM DEVELOPING COUNTRIES**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1. Name in Full | | | | | | | | | | | | | | | 2. Gender | | | | | | | | | | | | 3. Date of Birth | | | | | | | | | |
| Family First Middle | | | | | | | | | | | | | | | □Male □Female | | | | | | | | | | | | Day Month Year | | | | | | | | | |
| 4. Nationality | | | | | | | | | | | 5.Citizenship | | | | | | | | | | | | | | | | 6. Permanent Resident | | | | | | | | | |
|  | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | |
| 7. Current Appointment and/ or Status | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Title: | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Division: | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Institution: | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 8. Academic Degree (Ph.D.) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Type: | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | Date Obtained (or Expected) | | | | | | | |
| Field: | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | / |  | | / |  |
| Institute: | |  | | | | | | | | | | | | | | | | Country: | | | | | | | | | | | Day Month Year | | | | | | | |
| 9. Higher Education (Start from the latest one) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name of University / Institution | | | | | | | | | | Location | | | | | | | Degree | | | | | | | | | Field | | | | | | | | Completion Date (Month/Year) | | |
|  | | | | | | | | | |  | | | | | | |  | | | | | | | | |  | | | | | | | |  | | |
| 10. Previous Employment (Start from the latest one) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name of Institution | | | | | | | | | | | | Location | | | | | | | | | | Position | | | | | | | | From– to(Month/Year) | | | | | | |
|  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | |  | | | | | | |
| 11. Academic Awards (Please indicate title, year and conferrer.) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 12. Research Field and Specialization | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 13. Name of Proposed Host Researcher and Host Institution | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Host Researcher: | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Title: | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Division: | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Host Institution: | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 14. Research Theme in CAS (up to 100 letters including spaces and symbols) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 15. Proposed Tenure | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| From: |  | | | / | |  | | / |  | | | to | | | |  | | | | / |  | | | / |  | | | Total: | | | | | |  | | |
| DayMonthYearDayMonthYearMonths | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 16. Research Plan in CAS: Please include at least the following items:  a. Present research relevant to proposed research plan  b. Purpose of proposed research  c. Proposed Plan  d. Expected results | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 17. Subject and Achievement of Past Research | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 18. List of Major Publications  Authors (all,)Year, Title, Journal, Vol, No., pp.- | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 19. Language Ability (5: excellent ………1: poor) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | Reading | | | | | | | Writing | | | | | | | | | Listening | | | | | | | | Speaking | | | | | |
| English | | | | | | | 5 4 3 2 1 | | | | | | | 5 4 3 2 1 | | | | | | | | | 5 4 3 2 1 | | | | | | | | 5 4 3 2 1 | | | | | |
|  | | | | | | | 5 4 3 2 1 | | | | | | | 5 4 3 2 1 | | | | | | | | | 5 4 3 2 1 | | | | | | | | 5 4 3 2 1 | | | | | |
|  | | | | | | | 5 4 3 2 1 | | | | | | | 5 4 3 2 1 | | | | | | | | | 5 4 3 2 1 | | | | | | | | 5 4 3 2 1 | | | | | |
|  | | | | | | | 5 4 3 2 1 | | | | | | | 5 4 3 2 1 | | | | | | | | | 5 4 3 2 1 | | | | | | | | 5 4 3 2 1 | | | | | |
| Chinese | | | | | | | 5 4 3 2 1 | | | | | | | 5 4 3 2 1 | | | | | | | | | 5 4 3 2 1 | | | | | | | | 5 4 3 2 1 | | | | | |
| 20. Previous Stay(s) in CAS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Place: | | | | | | | | | | | | | Year: | | | | | | | | | | | Purpose: | | | | | | | | | | | | |
|  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |
|  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |
|  | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |
| 21. Name(s) of other fellowship(s) for which you are now applying | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 22. Mailing Address(Approximately three months after receiving an application, CAS will send out fellowship-commencement documents, so care should be taken to ensure that the address will remain valid. Please check Office or Home; unless otherwise stated we will send the documents to your Office.） | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| □Office: | | | | | | | | | | | | | | | | | | | □Home: | | | | | | | | | | | | | | | | | |
| Tel: | | | | | | | | | | | | | | | | | | | Tel: | | | | | | | | | | | | | | | | | |
| Fax: | | | | | | | | | | | | | | | | | | | Fax: | | | | | | | | | | | | | | | | | |
| E-mail: | | | | | | | | | | | | | | | | | | | E-mail: | | | | | | | | | | | | | | | | | |
| 23. Will you be accompanied by spouse and/or off spring(s)? If so, please indicate their names and relationship.  Name: Relationship: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 24. If you have been previously awarded as a CAS fellowship or participated in another CAS research program, please indicate the name of the program and the period of your participation.  Name of the program:  Period of participation: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

**I certify the above information to be accurate and correct.**

Date:

Name (Print):

Signature:

(Applicant’s signature)